Best Available Copy

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

CLAIMS AS FILED - PAR (Column 1)					(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			j					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			//O minus 20=		· 0			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			<u></u>		· Ø			X40=		OR	X80=		
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=		OR	+270=	-	
* If the difference in column 1 is less than zero, enter "0"						olumn 2	Ĺ	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST] (-	SIMALL D		จ ก	DINIALL		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	ependent * Minus *** ST PRESENTATION OF MULTIPLE DEPENDEN			T CLAIM	= [X40=		OR	X80=		
	THIST PHESE	INTATION OF MI	JETIPLE DEF	ENDEN	CLAIM			+135=		OR	+270=		
								TOTAL		OR	TOTAL ADDIT. FEE		
		A	DDIT. FEE (٠. ك	ADDII. FEC	<u></u>						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	* NTATION OF MI	Minus	***	T CL AIM	<u> =</u>		X40=		OR	X80=		
<u> </u>								+135=		OR	+270=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X40=		00	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						』			OR	55-		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=		
**	** If the entry in column 1 is less than the entry in column 2, write "o' in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												